Emergency Protocol – COVID-19 Testing Version 3

In pursuit of the authorizations to establish emergency protocols under Saf-C 7402.01, any licensed EMS unit choosing to assist in COVID-19 testing should comply with training and compentency requirements determined by the New Hampshire Department of Public Health. Such training will be coordinated through requesting public health entity. This is a voluntary protocol for departments wishing to assist public health.

INDICATIONS:

Pre-hospital providers (EMR, EMT, Advanced EMT and Paramedic) may be called upon to provide COVID-19 testing as necessary to assist state health officials in the event of a public health or public safety incident.

Non-Patient Specific Orders:

A non-patient specific order authorizes pre-hospital providers to provide COVID-19 testing for a specified period of time to an entire group of persons such as school children, employees, patients of a nursing home, etc.

Administration of Testing Procedure

The non-patient specific standing order and protocol must be authorized by a physician.

Public Health or Public Safety Incident

Any pre-hospital provider may provide COVID-19 testing that is authorized by a non - patient specific standing order and protocol as part of a testing program when the program is instituted as a result of a public health or public safety incident by public health officials.

Protocol Requirements

For initial diagnostic testing for SARS-CoV-2, CDC recommends collecting and testing upper respiratory tract specimens (nasopharyngeal or oropharyngeal swab).

Nasopharyngeal swab AND oropharyngeal swab (NP/OP swab)

Use only synthetic fiber flocked swabs with plastic shafts. Do not use calcium alginate swabs or swabs with wooden shafts, as they may contain substances that inactivate some viruses and inhibit PCR testing.

Posterior Swab Procedures:

Nasopharyngeal:

- 1. All proper PPE must be worn to include facemask, eye protection, gloves and isolation gown.
- 2. Have patient blow their nose into tissue and properly discard.
- 3. Insert a flocked swab into the nostril parallel to the palate.
- 4. Leave the flocked swab in place for a few seconds to absorb secretions.
- Place flocked swabs immediately into sterile tubes containing 2-3 ml of viral transport media. NP specimens may be kept in separate vials or combined at collection into a single vial
- 6. Insert specimen vials into a cooler that provides the correct target temperature.

Oropharvngeal:

- 1. All proper PPE must be worn to include facemask, eye protection, gloves and isolation gown.
- 2. Swab the posterior pharynx, avoiding the tongue.
- 3. Leave the flocked swab in place for a few seconds to absorb secrtions.
- 4. Place flocked swabs immediately into sterile tubes containing 2-3 mL of viral transport media. OP specimens may be kept in separate vials or combined at collection into a single vial.
- 5. Insert specimen vials into a cooler that provides the correct target temperature.

Protocol Continues

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Anterior Swab Procedures:

- 1. Using a flocked or spun polyester swab, insert the swab at least 1 cm (0.5 inch) inside the nostril (naris) and firmly sample the nasal membrane by rotating the swab and leaving in place for 10 to 15 seconds.

 2. Sample both nostrils with same swab.
- 3. Do not return the nasal swab to the original paper packaging.
- 4. Once obtained, follow the processes below dependant on testing type.

For PCR Testing:

- 1. Place flocked swabs immediately into sterile tubes containing 2-3 ml of viral transport media.
- 2. NP specimens may be kept in separate vials or combined at collection into a single vial.
- 3. Insert specimen vials into a cooler that provides the correct target temperature.

For Rapid Antigen Testing:

1. Use sample to perform test per manufacturer's guidelines.

PEARLS

- Before the COVID-19 testing is administered, obtain consent for the testing from the potential recipient.
- In cases of minors and persons incapable of consenting to COVID-19 testing consent may be gained by informing the legally responsible person and obtaining a written consent prior to testing.
- Coordinate with program site managers to ensure that a record is kept of all potential recipients, noting those who declined testing if applicable.